

Application Checklist

An application must include the following items.

Executive Summary
Section A: Background, Qualifications, Experience, & Past Performance of Applicant and Any Identified Community Partners (30 maximum points) <ol style="list-style-type: none">1. Background and Organizational History2. Staff Qualifications3. Organizational Qualifications and Past Performance, Including Experience with Veterans
Section B: Program Concept & Suicide Prevention Services Plan (30 maximum points) <ol style="list-style-type: none">1. Need for Program2. Outreach/Screening Plan3. Program Concept4. Program implementation timeline5. Coordination with VA6. Ability to Meet VA's Requirements, Goals, and Objectives for SSG Fox SPGP7. Capacity to Undertake Program
Section C: Quality Assurance & Evaluation Plan (15 maximum points) <ol style="list-style-type: none">1. Program Evaluation2. Monitoring3. Remediation4. Management and Reporting
Section D: Financial Capability & Plan (15 maximum points) <ol style="list-style-type: none">1. Organizational Finances2. Financial Feasibility of Program
Section E: Area Linkages and Relations (10 maximum points) <ol style="list-style-type: none">1. Area Linkages2. Past Working Relationships3. Local Presence and Knowledge4. Integration of Linkages and Program Concept
Section F: Certifications
Section G: Reference Citations
Exhibit I: Applicant Organizational chart
Exhibit II: Key Personnel Resumes and Hiring Criteria for Proposed Staff
Exhibit III: Program budget (complete attached Microsoft Excel Applicant Budget Template)
Exhibit IV: Documentation that demonstrates your organization is one of the required eligible entities listed below. (I.E. Bylaws, Articles of Incorporation, 501c3, etc.) <ul style="list-style-type: none">○ An incorporated private institution or foundation that (i) has no part of the net earnings of which incurr to the benefit of any member, founder, contributor, or individual and (ii) has a governing board that would be responsible for the operation of the suicide prevention services

under this part

- A corporation wholly owned and controlled by an organization meeting the requirements of clauses(i) and (ii) above
- A community-based organization that can effectively network with local civic organizations, regional health systems and other settings where eligible individuals and their families are likely to have contact
- An Indian tribe
- A State or local government

Exhibit V: (Optional) Letters of support from area Suicide Prevention Initiatives where services are proposed; relevant Memoranda of Understanding (MOUs) demonstrating area linkages and/or Partnership Agreements.